



Perinatal Mental Health

Risk Factors, Symptoms, and Identification
of Postpartum Depression

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Background on Perinatal Depression

- Symptoms
- Risk Factors
- Prevalence
- Timing of Onset
- Screening and Identification
- Resources

Postpartum Depression

- Approximately 10-15% of women will experience postpartum depression.
- An additional 40-50% of low-income women are estimated to have elevated depressive symptoms, which are linked to the same poor maternal and child health outcomes (Ammerman et al., 2009)
- Women who experience PPD are more likely to develop recurrent mood disorders throughout life, as well as impaired attachment and parenting (Meltzer-Brody & Stuebe, 2014).
- PPD is linked to developmental delays among infants, including social interaction difficulties, attachment insecurity, and cognitive impairments (Grace et al., 2003; Sohr-Preston & Scaramella, 2006).

Expectations of Motherhood

- Expectations and fantasies are a natural and healthy way of preparing for motherhood
 - Experiences
 - Cultural background
- In face of discrepancy between what is anticipated and what is experienced can lead to guilt, confusion, unhappiness, anxiety
- Women with PPD, increased quantity and severity of those disappointments
- No woman with PPD has initial stages of motherhood as she'd fantasized
- Consequently, help-seeking for PPD is hindered by the disconnect between how a new mom feels, and how she thinks she is supposed to feel.

A "Perfect Storm"

- Unrealistic expectations
- Hormonal changes
- Sleep Deprivation
- Single biggest identity transition for women
- Possible difficulties in pregnancy or birth
- Possible predisposition for depression or anxiety (prior depression is biggest predictor for postpartum depression)

Common Mood Symptoms

Feeling sad or "empty", crying more often

- Feeling numb or disconnected from baby
- Loss of interest in activities, withdrawing from loved ones
- Feeling hopeless, like nothing good ever happens
- Feeling guilty, worthless, like a failure, or like she isn't being a good mother
- Irritability or anger
- Loss of energy
- Problems concentrating, remembering things, making decisions
- Difficulty falling asleep or sleeping too much
- Overeating or loss of appetite
- Worried about hurting the baby
- Thoughts of suicide or 'life not worth living'

Postpartum Blues or Baby Blues

This is a more common experience than people think!

- After giving birth, 3 to 8 out of 10 women may have baby blues
- Symptoms usually start within the first week after delivery, and last less than 2 weeks
- *Often, women are screened by their OB in their postpartum visit, with symptoms perceived as brief and transient*
- *Important to re-screen at a later date, in case symptoms have not resolved, have worsened, or have begun later in the postpartum period.*

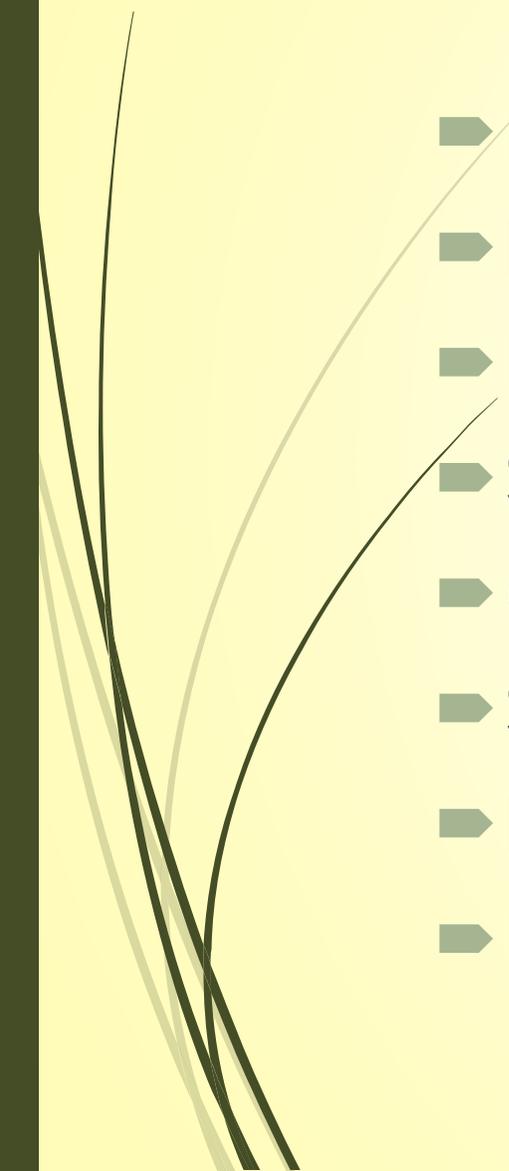
Postpartum Depression

After giving birth, 1-3 women out of 10 may develop postpartum depression

- Women may experience 5 more mood symptoms, lasting more than 2 weeks
- Symptoms may get in the way of doing normal daily activities
- Onset of symptoms
- Recent research shows that the timing and onset of PPD varies widely:
 - 40% of women who experience PPD after delivery
 - 33% of women experience PPD beginning during pregnancy
 - 27% of women who experience PPD were depressed before pregnancy

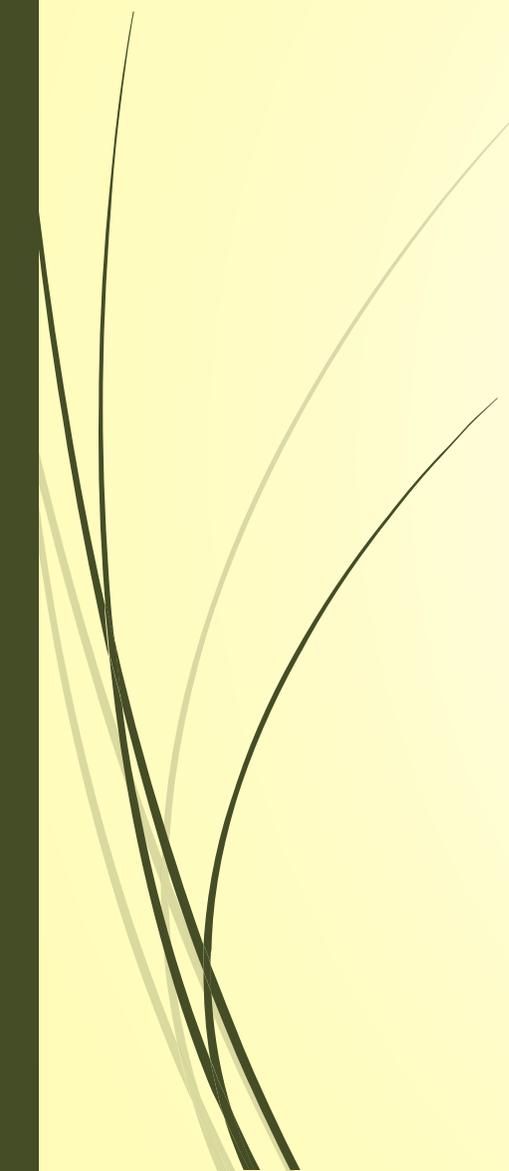


Risk Factors For Maternal Depression

- Previous history of depression
 - Low social support
 - Relationship dissatisfaction
 - Stressful life events
 - Obstetrics complications
 - Single parent
 - Low-income
 - Unplanned pregnancy
- 



How do depressed new mothers *FEEL*?

- Depressed, sad, mournful
 - Anxious, Panic
 - Feelings of unreality, "Numb"
 - Resentful
 - Irritable or angry
 - Regretful, "What have I done?"
 - Hopeless
 - Lonely
 - Feelings of Loss, Missing "old life"
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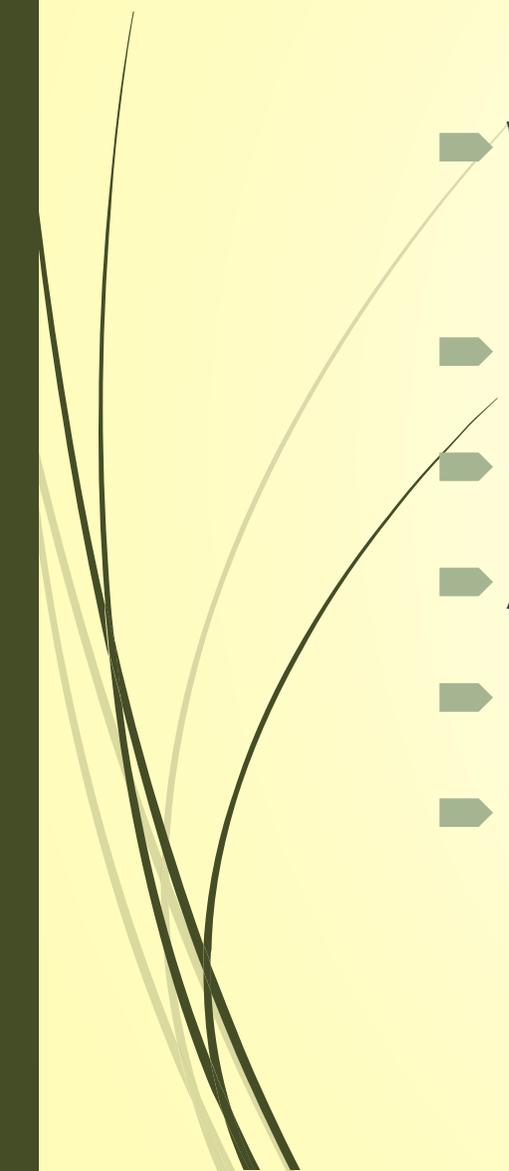
How do depressed new mothers

THINK?

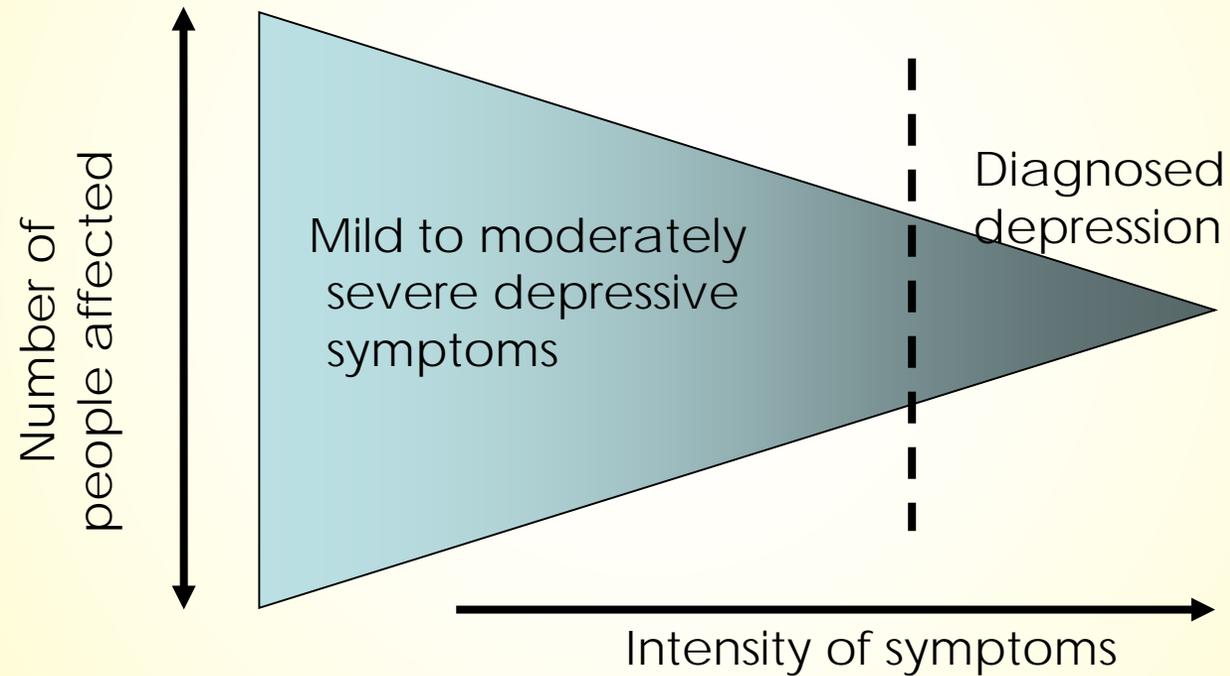
- Unrealistic expectations new motherhood
- Unrealistic expectations for baby
- Preoccupation with baby's safety & vulnerability
- Negative thinking/thought distortions
- Suicidal ideation
- Egodystonic thoughts of harming baby
- Obsessive-compulsive thoughts and behaviors



What do depressed new mothers *DO*?

- Withdraw from activities that used to give them pleasure
 - Diminished or absent bond with baby
 - Conflict or strain with partner
 - Avoid sex and/or physical affection
 - Experience sleep problems
 - Increased risk for breastfeeding difficulties
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Major Depression is Only Part of the Picture



Most common barriers to getting help for PPD

- *Reluctance to disclose emotional problems, particularly depression*
 - Shame, stigma, fear of being labeled mentally ill, burdensome
- *Reluctance to respond to the mothers' emotional and practical needs*
 - by both family members and health professionals'
- *Lack of knowledge/awareness about postpartum depression*
 - "I thought this was a normal part of motherhood"
- *Lack of resources to get assistance*
 - Limited mental health resources, no insurance, competing demands on time
- *Trying to handle it on their own*
 - "Dealing with it"; "keeping the faith"; "trying to be a strong woman"; "keeping it a secret"

Dennis, CL, & Chung-Lee, L, 2006

Delivering mental health intervention in other settings

- Addresses major depression and clinically relevant symptoms
- MB develops the capacity of staff to address stress and depression among their clients
- MB easily integrates with other services and programs as an “overlay” to address mental health concerns
- Clients are more accepting of a mental health intervention from a trusted provider